

CON Review Standards for Nursing Home & HLTCU Beds

By: Joette Laseur
CON Specialist/Reviewer
October 12, 2010

OBJECTIVES

- Explain the CON Nursing Home Standards.
- Discuss the standards implications on increasing beds, relocating beds, replacing beds, acquiring beds and comparative review.
- Describe the implications of the Nursing Home and Hospital Long-Term-Care Unit Certification Report (form CON-217-A).
- Identify culture change models.

- **Section 1. Applicability**

- Sec. 1. (1) These standards are requirements for approval and delivery of services for all projects approved and certificates of need issued under Part 222 of the Code which involve nursing homes and hospital long-term-care units.

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- **Section 2. Definitions**

- Sec. 2. (1) As used in these standards:
- (a) "Acquisition of an existing nursing home/HLTCU" means the issuance of a new nursing home/HLTCU license as the result of the acquisition (including purchase, lease, donation, or other comparable arrangement) of an existing licensed and operating nursing home/HLTCU and which does not involve a change in bed capacity of that health facility.

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- (g) "Common ownership or control" means a nursing home, regardless of the state in which it is located, that is owned by, is under common control of, or has a common parent as the applicant nursing home pursuant to the definition of common ownership or control utilized by the Department's Bureau of Health Systems.

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- (h) "Comparative group" means the applications which have been grouped for the same type of project in the same planning area or statewide special pool group and which are being reviewed comparatively in accordance with the CON rules.

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- (i) "Converted space" means existing space in a health facility that is not currently licensed as part of the nursing home/HLTCU and is proposed to be licensed as nursing home or HLTCU space. An example is proposing to license home for the aged space as nursing home space.

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- (k) "Department inventory of beds" means the current list, for each planning area maintained on a continuing basis by the Department: (i) licensed nursing home beds and (ii) nursing home beds approved by a valid CON issued under Part 222 of the Code which are not yet licensed.

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- (l) "Existing nursing home beds" means, for a specific planning area, the total of all nursing home beds located within the planning area including: (i) licensed nursing home beds, (ii) nursing home beds approved by a valid CON issued under Part 222 of the Code which are not yet licensed,

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- (iii) proposed nursing home beds under appeal from a final Department decision made under Part 222 or pending a hearing from a proposed decision issued under Part 222 of the Code,.
- and (iv) proposed nursing home beds that are part of a completed application under Part 222 of the Code which is pending final Department decision

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- (m) "Health service area" or "HSA" means the geographic area established for a health systems agency pursuant to former Section 1511 of the Public Health Service Act and set forth in Section 14.
- (n) "Hospital long-term-care unit" or "HLTCU" means a nursing care facility, owned and operated by and as part of a hospital, that provides organized nursing care and medical treatment to seven (7) or more unrelated individuals suffering or recovering from illness, injury, or infirmity.

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- (t) "New design model" means a nursing home/HLTCU built in accordance with specified design requirements as identified in the applicable sections.

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- (w) "Nursing home" means a nursing care facility, including a county medical care facility, but excluding a hospital or a facility created by Act No. 152 of the Public Acts of 1885, as amended, being sections 36.1 to 36.12 of the Michigan Compiled Laws, that provides organized nursing care and medical treatment to seven (7) or more unrelated individuals suffering or recovering from illness, injury, or infirmity. This term applies to the licensee only and not the real property owner if different than the licensee.

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- (z) "Planning area" means the geographic boundaries of each county in Michigan with the exception of: (i) Houghton and Keweenaw counties, which are combined to form one planning area and (ii) Wayne County which is divided into three planning areas. Section 12 identifies the three planning areas in Wayne County and the specific geographic area included in each.

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- (cc) "Qualifying project" means each application in a comparative group which has been reviewed individually and has been determined by the Department to have satisfied all of the requirements of Section 22225 of the Code, being Section 333.22225 of the Michigan Compiled Laws and all other applicable requirements for approval in the Code and these standards.

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- (dd) "Relocation of existing nursing home/HLTCU beds" means a change in the location of existing nursing home/HLTCU beds from the licensed site to a different licensed site within the planning area.
- (ee) "Renewal of lease" means execution of a lease between the licensee and a real property owner in which the total lease costs exceed the capital expenditure threshold.

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- (ff) "Replacement bed" means a change in the location of the licensed nursing home/HLTCU, the replacement of a portion of the licensed beds at the same licensed site, or the replacement of a portion of the licensed beds pursuant to the new model design. The nursing home/HLTCU beds will be in new physical plant space being developed in new construction or in newly acquired space (purchase, lease, donation, etc.) within the replacement zone.

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- (gg) "Replacement zone" means a proposed licensed site that is,
 - (i) for a rural or micropolitan statistical area county, within the same planning area as the existing licensed site.
 - (ii) for a county that is not a rural or micropolitan statistical area county,
 - (A) within the same planning area as the existing licensed site and
 - (B) within a three-mile radius of the existing licensed site.

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- **Section 3. Determination of needed nursing home bed supply**
- **Section 4. Bed need**
- **Section 5. Modification of the age specific use rates by changing the base year**

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- **Section 6. Requirements for approval to increase beds in a planning area**
- Sec. 6. An applicant proposing to increase the number of nursing home beds in a planning area must meet the following as applicable:
 - (1) An applicant proposing to increase the number of nursing home beds in a planning area by beginning operation of a new nursing home/HLTCU or increasing the number of beds to an existing licensed nursing home/HLTCU shall demonstrate the following:

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- (a) At the time of application, the applicant, as identified in the table, shall provide a report demonstrating that it does not meet any of the following conditions in 14%, but not more than five, of its nursing homes/HLTCUs:

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- (i) A state enforcement action resulting in a license revocation, reduced license capacity, or receivership within the last three years, or from the change of ownership date if the facility has come under common ownership or control within 24 months of the date of the application.
- (ii) A filing for bankruptcy within the last three years, or from the change of ownership date if the facility has come under common ownership or control within 24 months of the date of the application.

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- (iii) Termination of a Medical Assistance Provider Enrollment and Trading Partner Agreement initiated by the Department or licensing and certification agency in another state, within the last three years, or from the change of ownership date if the facility has come under common ownership or control within 24 months of the date of the application.

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- (iv) A number of citations at Level D or above, excluding life safety code citations, on the scope and severity grid on two consecutive standard surveys that exceeds twice the statewide average, calculated from the quarter in which the standard survey was completed, in the state in which the nursing home/HLTCU is located. For licensed only facilities, a number of citations at two times the average of all licensed only facilities on the last two licensing surveys.

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- However, if the facility has come under common ownership or control within 24 months of the date of the application, the first two licensing surveys as of the change of ownership date, shall be excluded.

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- (v) Currently listed as a special focus nursing home by the Center for Medicare and Medicaid services.
- (vi) Outstanding debt obligation to the State of Michigan for Quality Assurance Assessment Program (QAAP) or Civil Monetary Penalties (CMP).

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- (b) The applicant certifies that the requirements found in the Minimum Design Standards for Health Care Facilities of Michigan, referenced in Section 20145 (6) of the Public Health Code, Act 368 of 1978, as amended and are published by the Department, will be met when the architectural blueprints are submitted for review and approval by the Department.

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- (c) A Plan of Correction for cited state or federal code deficiencies at the health facility, if any, has been submitted and approved by the Bureau of Health Systems within the Department. Code deficiencies include any unresolved deficiencies still outstanding with the Department.

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- (d) The proposed increase, if approved, will not result in the total number of existing nursing home beds in that planning area exceeding the needed nursing home bed supply set forth in Appendix B, unless one of the following is met:

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- (i) An applicant may request and be approved for up to a maximum of 20 beds if, when the total number of "existing nursing home beds" is subtracted from the bed need for the planning area set forth in Appendix B, the difference is equal to or more than 1 and equal to or less than 20. This subsection is not applicable to projects seeking approval for beds from the statewide pool of beds.

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- (ii) An exception to the number of beds may be approved, if the applicant facility has experienced an average occupancy rate of 97% for 12 quarters based on the Department's "Staffing/Bed Utilization Ratios Report." The number of beds that may be approved in excess of the bed need for each planning area identified in Appendix B is set forth in subsection (A).

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- (iii) An applicant may request and be approved for up to a maximum of 20 beds if the following requirements are met:
 - (A) The planning area in which the beds will be located shall have a population density of less than 28 individuals per square mile based on the 2000 U.S. Census figures as set forth in Appendix D.
 - (B) The applicant facility has experienced an average occupancy rate of 92% for the most recent 24 months based on the Department's "Staffing/Bed Utilization Ratios Report."

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- (2) An applicant proposing to increase the number of nursing home beds in a planning area by beginning operation of a new nursing home/HLTCU or increasing the number of beds to an existing licensed nursing home/HLTCU pursuant to the new design model shall demonstrate the following:

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- (b) The proposed project results in no more than 100 beds per new design model and meets the following design standards:
 - (i) For inpatient facilities that are not limited to group resident housing of 10 beds or less, the construction standards shall be those applicable to nursing homes in the document entitled Minimum Design Standards for Health Care Facilities in Michigan and incorporated by reference in Section 20145(6) of the Public Health Code, being Section 333.20145(6) of the Michigan Compiled Laws or any future versions.

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- (ii) For small resident housing units of 10 beds or less that are supported by a central support inpatient facility, the construction standards shall be those applicable to hospice residences providing an inpatient level of care, except that:

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- (A) at least 100% of all resident sleeping rooms shall meet barrier free requirements;
- (B) electronic nurse call systems shall be required in all facilities;
- (C) handrails shall be required on both sides of patient corridors; and
- (D) ceiling heights shall be a minimum of 7 feet 10 inches.
- (iii) The proposed project shall comply with applicable life safety code requirements and shall be fully sprinkled and air conditioned.
- (iv) The Department may waive construction requirements for new design model projects if authorized by law.

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- (c) The proposed project shall include at least 80% single occupancy resident rooms with an adjoining bathroom serving no more than two residents in both the central support inpatient facility and any supported small resident housing units.
- (d) The proposed increase, if approved, will not result in the total number of existing nursing home beds in that planning area exceeding the needed nursing home bed supply set forth in Appendix B, unless the following is met:
 - (i) An approved project involves replacement of a portion of the beds of an existing facility at a geographic location within the replacement zone that is not physically connected to the current licensed site. If a portion of the beds are replaced at a location that is not the current licensed site, a separate license shall be issued to the facility at the new location.

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- **Section 7. Requirements for approval to relocate existing nursing home/HLTCU beds**

- Sec. 7. (1) An applicant proposing to relocate existing nursing home/HLTCU beds shall not be required to be in compliance with the needed nursing home bed supply set forth in Appendix B, if the applicant demonstrates all of the following:
 - (a) An existing nursing home may relocate no more than 50% of its beds to another existing nursing home, and an existing HLTCU may relocate all or a portion of its beds to another existing nursing home/HLTCU.

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- (b) The nursing home/HLTCU from which the beds are being relocated and the nursing home/HLTCU receiving the beds shall not require any ownership relationship.
- (c) The nursing home/HLTCU from which the beds are being relocated and the nursing home/HLTCU receiving the beds must be located in the same planning area.

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- (d) The nursing home/HLTCU from which the beds are being relocated has not relocated any beds within the last seven (7) years.
- (e) The relocated beds shall be licensed to the receiving nursing home/HLTCU and will be counted in the inventory for the applicable planning area.
- (f) At the time of transfer to the receiving facility, patients in beds to be relocated must be given the choice of remaining in another bed in the nursing home/HLTCU from which the beds are being transferred or to the receiving nursing home/HLTCU. Patients shall not be involuntary discharged to create a vacant bed.

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- (2) An applicant proposing to add new nursing home/HLTCU beds, as the receiving existing nursing home/HLTCU under subsection (1), shall not be required to be in compliance with the needed nursing home bed supply set forth in Appendix B, if the applicant demonstrates all of the following:

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- **Section 8. Requirements for approval to replace beds**

- Sec. 8. An applicant proposing to replace beds must meet the following as applicable.
- (1) An applicant proposing to replace beds within the replacement zone shall not be required to be in compliance with the needed nursing home bed supply set forth in Appendix B if the applicant demonstrates all of the following:
 - (a) At the time of application, the applicant, as identified in the table, shall provide a report demonstrating that it does not meet any of the following conditions in 14%, but not more than five, of its nursing homes/HLTCUs:

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- (2) An applicant proposing to replace a licensed nursing home/HLTCU outside the replacement zone shall demonstrate all of the following:
 - (a) At the time of application, the applicant, as identified in the table, shall provide a report demonstrating that it does not meet any of the following conditions in 14%, but not more than five, of its nursing homes/HLTCUs:

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- (c) The proposed project shall be within the replacement zone unless the applicant demonstrates all of the following:
 - (i) The proposed site for the replacement beds is in the same planning area, and not within a three mile radius of a licensed nursing home that has been newly constructed, or replaced (including approved projects) within five calendar years prior to the date of the application,

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- (ii) The applicant shall provide a signed affidavit or resolution from its governing body or authorized agent stating that the proposed licensed site will continue to provide service to the same market, and
- (iii) The current patients of the facility/beds being replaced shall be admitted to the replacement beds when the replacement beds are licensed, to the extent that those patients desire to transfer to the replacement facility/beds.

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- (d) An approved project may involve replacement of a portion of the beds of an existing facility at a geographic location within the replacement zone that is not physically connected to the current licensed site. If a portion of the beds are replaced at a location that is not the current licensed site, a separate license shall be issued to the facility at the new location.

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- **Section 9. Requirements for approval to acquire an existing nursing home/HLTCU or renew the lease of an existing nursing home/HLTCU**

- Sec. 9. An applicant proposing to acquire an existing nursing home/HLTCU or renew the lease of an existing nursing home/HLTCU must meet the following as applicable:

- (1) An applicant proposing to acquire an existing nursing home/HLTCU shall not be required to be in compliance with the needed nursing home bed supply set forth in Appendix B for the planning area in which the nursing home or HLTCU is located if the applicant demonstrates all of the following:
 - (a) At the time of application, the applicant, as identified in the table, shall provide a report demonstrating that it does not meet any of the following conditions in 14%, but not more than five, of its nursing homes/HLTCUs:

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- (b) The acquisition will not result in a change in bed capacity.
- (c) The licensed site does not change as a result of the acquisition.
- (d) The project is limited solely to the acquisition of a nursing home/HLTCU with a valid license.
- (e) A Plan of Correction for cited state or federal code deficiencies at the health facility, if any, has been submitted and approved by the Bureau of Health Systems within the Department. Code deficiencies include any unresolved deficiencies still outstanding with the Department, and

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- (f) The applicant shall participate in a quality improvement program, such as My Innerview, Advancing Excellence, or another comparable program for five years and provide an annual report to the Michigan State Long-Term-Care Ombudsman, Bureau of Health Systems, and shall post the annual report in the facility if the facility being acquired has met any of conditions in subsections (a)(i), (ii), (iii), (iv), (v), or (vi).

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- (2) An applicant proposing to acquire an existing nursing home/HLTCU approved pursuant to the new design model shall demonstrate the following:
 - (a) At the time of application, the applicant, as identified in the table, shall provide a report demonstrating that it does not meet any of the following conditions in 14%, but not more than five, of its nursing homes/HLTCUs:

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- (3) An applicant proposing to renew the lease for an existing nursing home/HLTCU shall not be required to be in compliance with the needed nursing home bed supply set forth in Appendix B for the planning area in which the nursing home/HLTCU is located, if the applicant demonstrates all of the following:
 - (a) The lease renewal will not result in a change in bed capacity.
 - (b) The licensed site does not change as a result of the lease renewal.
 - (c) A Plan of Correction for cited state or federal code deficiencies at the health facility, if any, has been submitted and approved by the Bureau of Health Systems within the Department. Code deficiencies include any unresolved deficiencies still outstanding with the Department.

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Section 10. Review standards for comparative review

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- Section 11. Project delivery requirements -- terms of approval for all applicants

(2) An applicant shall agree that, if approved, and material discrepancies are later determined within the reporting of the ownership and citation history of the applicant facility and all nursing homes under common ownership and control that would have resulted in a denial of the application, shall surrender the CON. This does not preclude an applicant from reapplying with corrected information at a later date.

- (3) The agreements and assurances required by this section shall be in the form of a certification agreed to by the applicant or its authorized agent.

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- Section 13. Wayne County planning areas

- Sec. 13. (1) For purposes of these standards the cities and/or townships in Wayne County are assigned to the planning areas as follows:

- Planning Area 84/Northwest Wayne

- Canton Township, Dearborn, Dearborn Heights, Garden City, Inkster, Livonia, Northville (part), Northville Township, Plymouth, Plymouth Township, Redford Township, Wayne, Westland

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- Planning area 85/Southwest Wayne
- Allen Park, Belleville, Brownstown Township, Ecorse, Flat Rock, Gibraltar, Grosse Ile Township, Huron Township, Lincoln Park, Melvindale, River Rouge, Riverview, Rockwood, Romulus, Southgate, Sumpter Township, Taylor, Trenton, Van Buren Township, Woodhaven, Wyandotte
- Planning area 86/Detroit
- Detroit, Grosse Pointe, Grosse Pointe Township, Grosse Pointe Farms, Grosse Pointe Park, Grosse Pointe Woods, Hamtramck, Harper Woods, Highland Park

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- **Section 14. Health Service Areas**
- Sec. 14. Counties assigned to each of the HSAs are as follows:

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- **Section 15. Effect on prior CON review standards, comparative reviews**

- Sec. 15. (1) These CON review standards supersede and replace the CON Standards for Nursing Home and Hospital Long-Term-Care Unit Beds approved by the CON Commission on March 11, 2008 and effective on June 2, 2008.
- (2) Projects reviewed under these standards involving a change in bed capacity shall be subject to comparative review except as follows:
 - (a) replacement of an existing nursing home/HLTCU being replaced in a rural county;

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- (b) replacement of an existing nursing home/HLTCU in a micropolitan or metropolitan statistical area county that is within two miles of the existing nursing home/HLTCU;
 - (c) relocation of existing nursing home/HLTCU beds; or
 - (d) an increase in beds pursuant to Section 6(1)(d)(ii) or (iii).
- (3) Projects reviewed under these standards that relate solely to the acquisition of an existing nursing home/HLTCU or the renewal of a lease shall not be subject to comparative review.

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- **CON REVIEW STANDARDS**
- **FOR NURSING HOME AND
HOSPITAL LONG-TERM CARE UNIT
BEDS**
- **--ADDENDUM FOR SPECIAL
POPULATION GROUPS**

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- **Section 1. Applicability; definitions**
- (4) For purposes of this addendum, the following terms are defined:
 - (a) "Behavioral patient" means an individual that exhibits a history of chronic behavior management problems such as aggressive behavior that puts self or others at risk for harm, or an altered state of consciousness, including paranoia , delusions, and acute confusion.
 - (b) "Hospice" means a health care program licensed under Part 214 of the Code, being Section 333.21401 et seq.
 - (c) "Infection control program," means a program that will reduce the risk of the introduction of communicable diseases into a ventilator-dependent unit, provide an active and ongoing surveillance program to detect the presence of communicable diseases in a ventilator-dependent unit, and respond to the presence of communicable diseases within a ventilator-dependent unit so as to minimize the spread of a communicable disease.

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- (d) "Licensed hospital" means either a hospital licensed under Part 215 of the Code; or
- a psychiatric hospital or unit licensed pursuant to Act 258 of the Public Acts of 1974, as amended, being sections 330.1001 to 330.2106 of the Michigan Compiled Laws.
- (e) "Private residence", means a setting other than a licensed hospital; or a nursing home including a nursing home or part of a nursing home approved pursuant to Section 6.
- (f) "Traumatic brain injury (TBI)/spinal cord injury (SCI) patient" means an individual with TBI or SCI that is acquired or due to a traumatic insult to the brain and its related parts that is not of a degenerative or congenital nature. These impairments may be either temporary or permanent and cause partial or total functional disability or psychosocial adjustment.
- (g) "Ventilator-dependent patient," means an individual who requires mechanical ventilatory assistance.

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- **Section 2. Requirements for approval -- applicants proposing to increase nursing home beds -- special use exceptions**
- **Section 3. Statewide pool for the needs of special population groups within the long-term care and nursing home populations**

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- **Section 5. Requirements for approval for beds from the statewide pool for special population groups allocated to behavioral patients**

- Sec. 5. The CON Commission determines there is a need for beds for applications designed to determine the efficiency and effectiveness of specialized programs for the care and treatment of behavioral patients as compared to serving these needs in general nursing home unit(s).

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- (1) An applicant proposing to begin operation of a new nursing home/HLTCU or add beds to an existing nursing home/HLTCU under this section shall demonstrate with credible documentation to the satisfaction of the Department each of the following:
 - (a) Individual units shall consist of 20 beds or less per unit.
 - (b) The facility shall not be awarded more than 40 beds.
 - (c) The proposed unit shall have direct access to a secure outdoor or indoor area for supervised activity.
 - (d) The unit shall have within the unit or immediately adjacent to it a day/dining area which is solely for the use of the behavioral patients.

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- (e) The physical environment of the unit shall be designed to minimize noise and light reflections to promote visual and spatial orientation.
- (f) Staff will be specially trained in treatment of behavioral patients.

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- (2) Beds approved under this subsection shall not be converted to general nursing home use without a CON for nursing home and hospital long-term care unit beds under the CON Review Standards for Nursing Home and Hospital Long-term Care Unit Beds.
- (3) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- **Section 6. Requirements for approval for beds from the statewide pool for special population groups allocated to hospice patients**
- Sec. 6. The CON Commission determines there is a need for beds for patients requiring both hospice and long-term nursing care services within the long-term care and nursing home populations.

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- (1) An applicant proposing to begin operation of a new nursing home/HLTCU or add beds to an existing nursing home/HLTCU under this section shall demonstrate, with credible documentation to the satisfaction of the Department, each of the following:
 - (a) An applicant shall be a hospice certified by Medicare pursuant to the Code of Federal Regulations, Title 42, Chapter IV, Subpart B (Medicare programs), Part 418 and shall have been a Medicare certified hospice for at least 24 continuous months prior to the date an application is submitted to the Department.
 - (b) An applicant shall demonstrate that, during the most recent 12-month period prior to the date an application is submitted to the Department for which verifiable data are available to the Department, at least 64% of the total number of hospice days of care provided to all of the clients of the applicant hospice were provided in a private residence.

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- (c) An application shall propose 30 beds or less.
- (d) An applicant for beds from the special statewide pool of beds shall not be approved if any application for beds in that same planning area has been approved from the special statewide pool of beds allocated for hospice.

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- (2) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- **Section 7. Requirements for approval for beds from the statewide pool for special population groups allocated to ventilator-dependent patients**
- Sec. 7. The CON Commission determines there is a need for beds for ventilator-dependent patients within the long-term care and nursing home populations

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- (1) An applicant proposing to begin operation of a new nursing home/HLTCU or add beds to an existing nursing home/HLTCU under this section shall demonstrate, with credible documentation to the satisfaction of the Department, each of the following:
 - (a) An applicant proposes a program for caring for ventilator-dependent patients in licensed nursing home beds.
 - (b) An application proposes no more than 40 beds that will be licensed as nursing home beds.
 - (c) The proposed unit will serve only ventilator-dependent patients.

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- (2) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- **Section 8. Acquisition of nursing home/HLTCU beds approved pursuant to this addendum**
- Sec. 8. (1) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to religious shall meet the following:
 - (a) The applicant is a part of, closely affiliated with, controlled, sanctioned or supported by a recognized religious organization, denomination or federation as evidenced by documentation of its federal tax exempt status as a religious corporation, fund, or foundation under section 501(c)(3) of the United States Internal Revenue Code.
 - (b) The applicant's patient population includes a majority of members of the religious organization or denomination represented by the sponsoring organization.

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- (c) The applicant's existing services and/or operations are tailored to meet certain special needs of a specific religion, denomination or order, including unique dietary requirements, or other unique religious needs regarding ceremony, ritual, and organization which cannot be satisfactorily met in a secular setting.
- (d) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- (2) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to TBI/SCI shall meet the following:
 - (a) The beds will be operated as part of a specialized program exclusively for TBI/SCI patients. At the time an application is submitted, the applicant shall demonstrate that it operates:
 - (i) a continuum of outpatient treatment, rehabilitative care, and support services for TBI/SCI patients; and
 - (ii) a transitional living program or contracts with an organization that operates a transitional living program and rehabilitative care for TBI/SCI patients.

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- (b) The applicant shall submit evidence of accreditation of its existing outpatient and/or residential programs by the Commission on Accreditation of Rehabilitation Facilities (CARF) or another nationally-recognized accreditation organization for rehabilitative care and services.
- (c) Within 24-months of accepting its first patient, the applicant shall obtain CARF or another nationally-recognized accreditation organization for the nursing home beds proposed under this subsection.

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- (d) A floor plan for the proposed physical plant space to house the nursing home beds allocated under this subsection that provides for:
 - (i) Individual units consisting of 20 beds or less per unit, not to be more than 40 beds per facility.
 - (ii) Day/dining area within, or immediately adjacent to, the unit(s), which is solely for the use of TBI/SCI patients.
 - (iii) Direct access to a secure outdoor or indoor area at the facility appropriate for supervised activity.
- (e) The applicant proposes programs to promote a culture within the facility that is appropriate for TBI/SCI patients of various ages.

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- (3) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to Alzheimer's disease shall meet the following:
 - (a) The beds are part of a specialized program for Alzheimer's disease which will admit and treat only patients which require long-term nursing care and have been appropriately classified as a patient on the Global Deterioration Scale (GDS) for age-associated cognitive decline and Alzheimer's disease as a level 4 (when accompanied by continuous nursing needs), 5, or 6.
 - (b) The specialized program will participate in the state registry for Alzheimer's disease.
 - (c) The specialized program shall be attached or geographically adjacent to a licensed nursing home and be no larger than 20 beds in size.

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- (d) The proposed Alzheimer's unit shall have direct access to a secure outdoor or indoor area at the health facility, appropriate for unsupervised activity.
- (e) The Alzheimer's unit shall have within the unit or immediately adjacent to it a day/dining area which is solely for the use of the Alzheimer's unit patients.
- (f) The physical environment of the Alzheimer's unit shall be designed to minimize noise and light reflections to promote visual and spatial orientation.
- (g) Staff will be specially trained in Alzheimer's disease treatment.
- (h) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- (4) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to behavioral patients shall meet the following:
 - (a) Individual units shall consist of 20 beds or less per unit.
 - (b) The facility shall not be awarded more than 40 beds.
 - (c) The proposed unit shall have direct access to a secure outdoor or indoor area for supervised activity.
 - (d) The unit shall have within the unit or immediately adjacent to it a day/dining area which is solely for the use of the behavioral patients.
 - (e) The physical environment of the unit shall be designed to minimize noise and light reflections to promote visual and spatial orientation.

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- (f) Staff will be specially trained in treatment of behavioral patients.
- (g) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- (5) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to hospice shall meet the following:
 - (a) An applicant shall be a hospice certified by Medicare pursuant to the code of Federal Regulations, Title 42, Chapter IV, Subpart B (Medicare Programs), Part 418 and shall have been a Medicare certified hospice for at least 24 continuous months prior to the date an application is submitted to the Department.
 - (b) An applicant shall demonstrate that, during the most recent 12-month period prior to the date an application is submitted to the Department for which verifiable data are available to the Department, at least 64% of the total number of hospice days of care provided to all of the clients of the applicant hospice were provided in a private residence.
 - (c) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- (6) An applicant proposing to acquire nursing home/HLTCU beds from the statewide pool for special population groups allocated to ventilator-dependent patients shall meet the following:
 - (a) An applicant proposes a program for caring for ventilator-dependent patients in licensed nursing home beds.
 - (b) An application proposes no more than 40 beds that will be licensed as nursing home beds.
 - (c) The proposed unit will serve only ventilator-dependent patients.
 - (d) All beds approved pursuant to this subsection shall be dually certified for Medicare and Medicaid.

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- **Section 10. Comparative reviews, effect on prior CON review standards**
- Sec. 10. (1) Projects proposed under Section 4 shall be considered a distinct category and shall be subject to comparative review on a statewide basis.
- (2) Projects proposed under Section 5 shall be considered a distinct category and shall be subject to comparative review on a statewide basis.
- (3) Projects proposed under Section 6 shall be considered a distinct category and shall be subject to comparative review on a statewide basis.
- (4) Projects proposed under Section 7 shall be considered a distinct category and shall be subject to comparative review on a statewide basis.

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